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Electronic Patent Application Submission
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EFS ID: 59399
Application ID: 10678630
Title of Invention: DISPLAY ENCLOSURE HAVING
THIN SPEAKER
First Named Inventor: JONATHAN GROMATSKY
Domestic/Foreign Application: Domestic Application
Filing Date: 2003-10-03
Effective Receipt Date: 2004-04-21
Submission Type: Information Disclosure
Statement
Filing Type:
Confirmation number: 9396
Attorney Docket Number: 2400-663A




Total Fees Authorized: 180.0
Payment Category: Credit Card
Credit Card Number: *****1002
Expiration Date: 04302007
Card Holder Name: Benjamin S. Withrow
Postal Code: 27540
RAM Payment Status: RAM success
RAM User ID: EFSPROD
RAM Accounting Date: 2004-04-21
RAM Sequence Number: 984690

Digital Certificate Holder: cn=Steven Terranova,ou=Registered Attorneys,ou=Patent and Trademark
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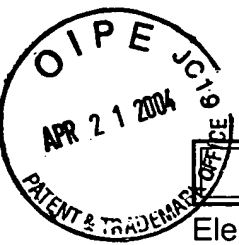


TRANSMITTAL

Electronic Version v1.1
Stylesheet Version v1.1.0

Title of Invention	DISPLAY ENCLOSURE HAVING THIN SPEAKER															
<p>Application Number: 10/678630 </p> <p>Date: 2003-10-03</p> <p>First Named Applicant: JONATHAN</p> <p>Confirmation Number: 9396</p> <p>Attorney Docket Number: 2400-663A</p>																
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<table border="1"><tr><td>Submitted by:</td><td>Elec. Sign.</td><td>Sign. Capacity</td></tr><tr><td>STEVEN N TERRANOVA Registered Number: 43185</td><td>/STEVEN N TERRANOVA/</td><td>Attorney</td></tr></table>			Submitted by:	Elec. Sign.	Sign. Capacity	STEVEN N TERRANOVA Registered Number: 43185	/STEVEN N TERRANOVA/	Attorney								
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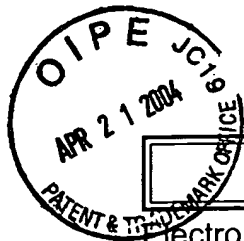
Comments



FEE TRANSMITTAL

Electronic Version v08
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Application Number: 10/678630 											
Date: 2003-10-03											
First Named Applicant: JONATHAN GROMATSKY											
Attorney Docket Number: 2400-663A											
Art Unit: 2837											
Examiner: EDGARDO SAN MARTIN											
TOTAL FEE AUTHORIZED \$180											
Patent fees are subject to annual revisions on or about October 1st of each year.											
BASIC FILING FEE											
<table border="1"><thead><tr><th>Fee Description</th><th>Fee Code</th><th>Amount \$</th><th>Fee Paid \$</th></tr></thead><tbody><tr><td>Submission Of Information Disclosure Stmt Fee</td><td>1806</td><td>180</td><td>180</td></tr></tbody></table>				Fee Description	Fee Code	Amount \$	Fee Paid \$	Submission Of Information Disclosure Stmt Fee	1806	180	180
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Submission Of Information Disclosure Stmt Fee	1806	180	180								
AUTHORIZED BILLING INFORMATION											
The commissioner is hereby authorized to charge indicated fees and credit any overpayments to:											
Credit account number: 1002											
Expiration Date (YYYYMMDD): 2007-04-30											
Authorized name: Benjamin S. Withrow											
Billing address: 27540											



ELECTRONIC INFORMATION DISCLOSURE STATEMENT

Electronic Version v18

Stylesheet Version v18.0

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	18	5961289	1999-10-05	LOHMANN	416	189
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	21	6104451	2000-08-15	MATSUOKA ET AL	349	58
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	23	6176421	2001-01-23	ROYAL JR ET AL	231	381

Signature

Examiner Name	Date